



Azixa, a Microtubule Destabilizing Agent, in Solid Tumors: Results of a Phase 1 Trial

Apostolia M. Tsimberidou, MD, PhD, Wallace Akerley, MD, Chaan Ng, MD, David Hong, MD, Terri Warren, RN, Margaret K. Yu, MD, Matthias Schabel, PhD, Edward A. Swabb, MD, PhD, Razelle Kurzrock, MD
The University of Texas M. D. Anderson Cancer Center, Department of Investigational Cancer Therapeutics, Houston, TX



Background

- MPC-6827 (Azixa™; a 4-arylaminoquinazoline) is a small molecule microtubule destabilizing agent that causes mitotic arrest and cell death
- In vitro*, MPC-6827 displayed proapoptotic activity, with potency at low nanomolar concentrations in a broad spectrum of cancer cells
- In mice, MPC-6827 significantly inhibited the growth of a variety of subcutaneously implanted tumor lines.
- MPC-6827 has also been shown to be a vascular-disrupting agent (VDA) in a human ovarian OVCAR-3 carcinoma xenograft
- VDAs have been established to reduce interstitial pressure in the tumor microenvironment, which may increase local exposure to cytotoxic chemotherapy

Patients and Methods

- Patients with advanced or metastatic cancer were treated with once-weekly intravenous (IV) infusion for 3 weeks every 28 days
- Dose escalation began with 0.3, 0.6, 1, and 1.5 mg/m²
- Subsequent increments of 0.6 mg/m² were given until the MTD was determined
- A conventional "3 + 3" design was used
- Responses were assessed using the Response Evaluation Criteria in Solid Tumors (RECIST)

Definition of DLT

- ≥ Grade (G) 3 nonhematologic toxicity (excluding nausea/vomiting or alopecia)
- ≥ G3 nausea/vomiting uncontrolled by aggressive antiemetic support
- G4 neutropenia lasting > 5 days
- Any febrile G3- 4 neutropenia
- G4 thrombocytopenia or
- ≥ G2 neurologic toxicity without resolution within 72 hrs

Pharmacokinetics

- Plasma concentrations of MPC-6827 and its O-demethyl metabolite, MPI-0440627 were determined after the first and third IV infusions during cycle 1 (i.e. on study days 1 and 15). Blood samples were collected before MPC-6827 administration, at the end of drug infusion, and at 1, 2, 4, 6, 12, and 24 hours post-infusion

Antitumor activity

- All subjects underwent a CT scan or MRI at screening, at Day 28 ± 7 days, and every 28 ± 7 days thereafter until the end of the study, and at the final visit

Patient Characteristics (N=48)

Characteristic	No. of pts	%
Age (years)		
Median	56	
Range	26-76	
Age ≥ 60 years	18	38
Gender		
Male	26	54
Female	22	46
Karnofsky PS		
100	12	25
90	5	10
80	29	60
70	2	4
No. of prior therapies		
Median	5	
Range	1-12	
No. of patients with brain mets	10	21
Type/site primary cancer		
Lung	8	17
Melanoma	7	15
Colon	6	13
Breast	4	8
Ovarian	3	6
Pancreas	3	6
Prostate	3	6
Renal cell	2	4
Other*	12	25

* Adenoid cystic (n=1), bronchoalveolar (n=1), endometrial (n=1), follicular dendritic (n=1), gastroesophageal adenocarcinoma (n=1), large cell carcinoma (n=1), Merkel cell carcinoma (n=1), mesothelioma (n=1), mucocutaneous carcinoma (n=1), parathyroid (n=1), thymoma (n=1), and tonsillar (n=1)

Distribution of Pts, Cycles, and DLTs

Dose mg/m ²	No. of pts	Site		No. of Cycles	No. of pts. with DLTs	Description of DLTs
		MDACC	Huntsman			
0.3	3	3		3-5	0	
0.6	3	3		1-2	0	
1.0	3	3		1-3	0	
1.5	7	6	1	1-5	2	G4 hypersensitivity, G3 dyspnea
2.1	3	2	1	1-2	0	
2.7	3	2	1	1	0	
3.3	13	11	2	1-4	0	
3.9	6	4	2	1-2	1	G3 myocardial infarction
4.5	7	5	2	1-10	1	G3 myocardial infarction

Parameters for MTD

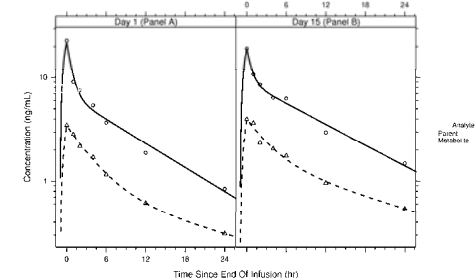
Day & Analyte	Redistribution	Terminal	C _{max}	AUC _(0-inf)
	t _{1/2} ^α	t _{1/2} ^β		
hr	hr	hr	ng/mL	hr*ng/mL
Day 1, MPC-6827 (parent)	0.16	15.10	22.83	99.66
Day 15, MPC-6827			19.11	144.70
Day 1, MPI-0440627 (metabolite)		12.90	3.56	54.53
Day 15, MPI-0440627		11.43	4.24	49.92

Mean Parameters for MTD of 3.3 mg/m², C_{max}, and AUC_(0-∞)

Adverse Events (I)

Dose, mg/m ²	0.3		0.6		1		1.5	
	n=3	n=3	n=3	n=3	n=3	n=7	n=7	
NCI-CTCAE Grade	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4
Hypersensitivity								2
Hyperglycemia		3						1
Flushing		6		3				5
Hot flush								2
Fatigue		2						4
Nausea						1		1
Vomiting								1
Headache				3				1
Elevated AST								3
Elevated ALT								4
Elevated alkaline phosphatase								7
Dyspnea								1
Myocardial infarction								1
Bradycardia								2
First degree AV block								1
Hypertension								9
Edema								1
Chest pain								1
Abdominal pain								2
Back pain								2
Skin pain								1
Myalgia								1
Pain in extremity						1		1
Pain								1
Anemia								1
Insomnia								1
Arthralgia				1				2
Mucosal Inflammation				1				1
Pruritus								1
Anorexia								2
Anxiety								1
Pyrexia								1

Parent and Metabolite Concentrations



MPC-6827 (parent) and MPI-0440627 (metabolite) mean concentrations for patients treated at the MTD of 3.3 mg/m². Panel A shows the Day 1 treatment, and Panel B shows Day 15 treatment. Parent mean concentrations are shown with circles, while metabolite concentrations are shown with triangles. The best fit line for parent is a solid line, while the best fit for metabolite is a dashed line.

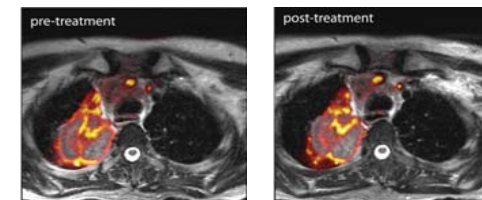
Adverse Events (II)

Dose, mg/m ²	2.1		2.7		3.3		3.9		4.5	
	n=3	n=3	n=3	n=14	n=14	n=6	n=6	n=6	n=6	
NCI-CTCAE Grade	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4	1-2	3-4
Hypersensitivity										
Hyperglycemia				1		1		1		1
Flushing						1		1		1
Hot flush										
Fatigue							5	1		1
Nausea						1		1		
Vomiting								1		
Headache							1			
Elevated AST										
Elevated ALT										
Elevated alkaline phosphatase										
Dyspnea										1
Myocardial infarction									1	1
Bradycardia								2		
First degree AV block										1
Hypertension								9		1
Edema								1		
Chest pain										1
Abdominal pain										2
Back pain										2
Skin pain										1
Myalgia										1
Pain in extremity									1	
Pain										1
Anemia										1
Insomnia										1
Arthralgia										2
Mucosal Inflammation										1
Pruritus								1		
Anorexia										1
Anxiety										2
Pyrexia										1

Stable Disease (N=5)

Age/ Sex	PS	Dose, mg/m ²	No. of Cycles	Type of Cancer	No. of Prior Therapies	Prior Therapies
64/F	100	0.3	5	Breast	11	Tamoxifen, anastrozole, estramustine, Faslodex, doxorubicin, gemcitabine, Xeloda, paclitaxel, 5-FU + cyclophosphamide + adriamycin, TAS-102, CRX-026
41/F	80	1.5	5	Endometrial	3	Medroxyprogesterone acetate, paclitaxel + carboplatin, tamoxifen + Arimidex
58/M	90	3.3	10	Carcinoid of the rectum	3	Bevacizumab, bevacizumab + erlotinib, AMG-386
50/M	80	3.3	4	Thymoma	5	Cyclophosphamide + adriamycin + cisplatin, Taxotere + carboplatin, carboplatin, azacitidine + valproic acid, RTA402
47/F	80	4.5/3.3	5	Parathyroid	2	MST-997 + zoledronic acid, docetaxel + zoledronic acid + cinacalcet hydrochloride

DCE-MRI



Dynamic contrast-enhanced magnetic resonance imaging (DCE-MRI) maps of K^{trans} in a patient with a large primary non-small cell lung cancer of the right apical lung

Conclusions

- MPC-6827 was well tolerated up to and including the MTD of 3.3 mg/m² IV once weekly x 3
- Myocardial infarction was the DLT at 3.9 mg/m² and 4.5 mg/m²
- MPC-6827 exhibited two-compartment kinetics with a short redistribution phase and a slower terminal elimination
- Five heavily pre-treated patients had stable disease for ≥ 4 months

